PTO/SB/17 (10-08)

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Date March 16, 2011

U.S. Patent and Trademank office; U.S. DeParktiet of Commence under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. ees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/589.018 Conf. No.: 4192 Application Number FFF TRANSMITTAL August 10, 2006 Filing Date For FY 2009 Shinichi NISHIDA First Named Inventor T. TRAN Evaminer Name Applicant claims small entity status. See 37 CFR 1.27 2422 Art I Init Attorney Docket No. TOTAL AMOUNT OF PAYMENT 940.00 1248-0890PUS1 METHOD OF PAYMENT (check all that apply) Credit Card Money Order Other (please identify): Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP ✓ Deposit Account Deposit Account Number: 02-2448 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES **FXAMINATION FEES** FILING FEES **Small Entity** Small Entity **Small Entity** Fee (\$) Fees Paid (\$) Fee (\$) Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) 330 540 220 110 Utility 165 270 140 70 Design 220 110 100 50 Plant 220 110 330 165 170 85 Reissne 330 165 540 270 650 325 220 Λ 0 Provisional 110 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 220 110 Each independent claim over 3 (including Reissues) 390 195 Multiple dependent claims **Multiple Dependent Claims** Total Claims Extra Claims Fee (\$) Fee Paid (\$) Fee (\$) Fee Pald (\$) - 20 or HP = 0 x HP = highest number of total claims paid for, if greater than 20. Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims - 3 or HP = 0 HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) 0 / 50 = 0 (round up to a whole number) x 0.00 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1801 RCE Fee; 1251 Extension for response within first month 940,00 SUBMITTED BY Registration No. 39491 Telephone 703-205-8000 Signature (Attorney/Agent)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the This collection of information is required by 37 CFR 1.136. The information is required to offising of relatin a Centerior by the paties. Where I is that up the UNIFOLD processor an application. Confidentially a governor is required to offising of relatin a Centerior by the Part of the UNIFOLD processor is an application. Confidentially as governor in the UNIFOLD processor is the UNIFOLD processor in the UNIFOLD processor in the UNIFOLD processor is the UNIFOLD processor in the UNIFOLD proce ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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